

ADAPTIVE SURVIVAL STYLES MANUAL

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INTRODUCTION TO THE NEUROAFFECTIVE RELATIONAL MODEL®

In recent years the role of self-regulation has become an important part of psychological thinking. *The NeuroAffective Relational Model*® (*NARM*) brings the current understanding of self-regulation into clinical practice. This resource-oriented, non-regressive model emphasizes helping clients establish connection to the parts of self that are organized, coherent and functional. It helps bring into awareness and organization the parts of self that are disorganized and dysfunctional without making the regressed, dysfunctional elements the primary theme of the therapy.

CORE PRINCIPLES

The NeuroAffective Relational Model® focuses on the fundamental tasks and functional unity of biological and psychological development. The *NARM* model:

- Integrates both a nervous system based and a relational orientation.
- Brings developmentally-informed clinical interventions that use somatic mindfulness and an orientation to resources to anchor self-regulation in the nervous system.
- Works clinically with the link between psychological issues and the body by helping access the body's self-regulatory capacities and by supporting nervous system re-regulation.
- Uses mindful inquiry into the deeper identifications and counter-identifications that we take to be our identity.

FIVE ORGANIZING DEVELOPMENTAL THEMES

There are five developmental life themes and associated core resources that are essential to our capacity for self-regulation and affect our ability to be present to self and others in the here-and-now:

- **Connection.** We feel that we belong in the world. We are in touch with our body and our emotions and capable of consistent connection with others.
- **Attunement.** Our ability to know what we need and to recognize, reach out for, and take in the abundance that life offers.
- **Trust.** We have an inherent trust in ourselves and others. We feel safe enough to allow a healthy interdependence with others.
- **Autonomy.** We are able to say no and set limits with others. We speak our mind without guilt or fear.
- **Love~Sexuality.** Our heart is open and we are able to integrate a loving relationship with a vital sexuality.

To the degree that these five basic needs are met, we experience regulation and connection. We feel safe and trusting of our environment, fluid and connected to ourselves and others. We experience a sense of regulation and expansion. To the degree that these basic needs are not met, we develop *survival styles* to try to manage the disconnection and dysregulation.

CORE NEED	ASSOCIATED CORE CAPACITIES ESSENTIAL TO WELL-BEING
CONNECTION	Capacity to be in touch with our body and our emotions Capacity to be connection with others
ATTUNEMENT	Capacity to attune to our needs and emotions Capacity to recognize, reach out for, and take in physical and emotional nourishment
TRUST	Capacity for healthy dependence and interdependence
AUTONOMY	Capacity to set appropriate boundaries Capacity to say no and set limits Capacity to speak our minds without guilt or fear
LOVE~SEXUALITY	Capacity to live with an open heart Capacity to integrate loving relationships with a vital sexuality

NARM's five core needs and their associated core capacities.

A FUNDAMENTAL SHIFT

Whereas much of psychodynamic psychotherapy has been oriented toward identifying pathology and focusing on problems, *NARM* is a model for therapy and growth that emphasizes working with strengths as well as with symptoms. It orients towards resources, both internal and external, in order to support the development of an increased capacity for self regulation.

At the heart of what may seem like a wide range of physical and emotional symptoms, most psychological and many of physiological problems can be traced to a disturbance in one or more of the five organizing developmental themes related to the survival styles.

Initially, survival styles are adaptive, representing success, not pathology. However, because the brain uses the past to predict the future, these survival patterns remain fixed in our nervous system and create an adaptive but false identity. It is the *persistence of survival styles* appropriate to the past that distorts present experience and creates symptoms. These survival patterns, having outlived their usefulness, *create* ongoing disconnection from our authentic self and from others.

In *NARM* the focus is less on *why* a person is the way they are and more on *how* their survival style distorts what they are experiencing in the present moment. Understanding how patterns began can be helpful to the client but is primarily useful to the degree that these patterns have become survival styles that influence present experience.

SURVIVAL STYLE	SHAME-BASED IDENTIFICATIONS	PRIDE-BASED COUNTER-IDENTIFICATIONS
CONNECTION	Shame at existing Feeling like a burden Feeling of not belonging	Pride in being a loner Pride in not needing others Pride in not being emotional
ATTUNEMENT	Needy Unfulfilled Empty Undeserving	Caretaker Pride in being the shoulder everyone cries on Make themselves indispensable and needed Pride in not having needs
TRUST	Small Powerless Used Betrayed	Strong and in control Successful Larger than life User, betrayer
AUTONOMY	Angry Resentful of authority Rebellious Enjoys disappointing others	Nice Sweet Compliant Good boy/girl Fear of disappointing others
LOVE-SEXUALITY	Hurt Rejected Physically flawed Unloved and unlovable	Rejects first Perfect Does not allow for mistakes “Seamless”—having everything together

Shame-based identifications and pride-based counter-identifications for each Adaptive Survival Style

THE METAPROCESS

Each therapeutic tradition has an implicit metaprocess. The metaprocess teaches clients to pay attention to certain elements of their experience and to ignore others. When therapies focus on deficiency, pain, and dysfunction, clients become skilled at orienting toward deficiency, pain, and dysfunction. Focusing on the difficulties of the past does not sufficiently reduce dysfunction nor support self-regulation.

The metaprocess for the *NARM* model is the mindful awareness of self in the present moment. The client is invited into a fundamental process of inquiry:

“What are the patterns that are preventing me from being present to myself and others at this moment and in my life?”

We explore this question on the following levels of experience: cognitive, emotional, felt sense, and physiological. *NARM* explores personal history to the degree that patterns from the past interfere with being present and in contact with self and others in the here-and-now. It brings an active process of inquiry to clients’ relational and survival styles, building on their strengths and helping them to experience a sense of agency in the difficulties of their current life.

The *NARM* metaprocess involves two aspects of mindfulness:

- Somatic mindfulness
- Mindful awareness of the organizing principles of one’s adaptive survival styles

Using a dual awareness that is anchored in the present moment, a person becomes mindful of cognitive, emotional, and physiological patterns that began in the past while not falling into the trap of making the past more important than the present. Working with the *NARM* approach progressively reinforces the connection to self in the present moment. Tracking the process of connection/disconnection, regulation/dysregulation in present time helps clients connect with their sense of agency and feel less like victims of their childhood.

Using resource-oriented techniques that work with subtle shifts in the nervous system adds significant effectiveness. Working with the nervous system is fundamental in disrupting the predictive tendencies of the brain. It is connection to our body and to other people that brings healing re-regulation. Using techniques that support increased connection with self and others is instrumental in supporting effective re-regulation.

BOTTOM-UP AND TOP-DOWN

There are continual loops of information going in both directions from the body to the brain and from the brain to the body. There are similar loops within the lower and higher structures of the brain, that is between the brain stem, limbic system, and cortex.

NARM uses both *top-down* and *bottom-up* approaches. Top-down approaches emphasize cognitions and emotions as the primary focus. Bottom-up approaches, on the other hand, focus on the body, the felt sense and the instinctive responses as they are mediated through the brain stem toward higher levels of brain organization. Using both bottom-up *and* top-down orientations greatly expands therapeutic options.

WORKING WITH THE LIFE FORCE

The spontaneous movement in all of us is toward connection and health. No matter how withdrawn and isolating we have become, or how serious the trauma we have experienced, on the deepest level, just as a plant spontaneously moves towards the sun, there is in each of us an impulse moving toward connection. This organismic impulse is the fuel of *The NeuroAffective Relational Model*®.
